Grouping	Data	State Fields/Defined Elements	KYWC	Max	IAIABC	Position	
	NBR		Requirements	Occ	Format	Beg	End
			·				
INSURED RECOR	D LAYOUT						
Transaction	1	Transaction Set ID	M	1	3	1	3
	107	Record Sequence Number	M	1	9	4	12
	300	Transaction Set Purpose Code	M	1	2	13	14
	302	Jurisdiction Designee Received Date	M	1	8	15	22
	2	Transaction Set Type Code	M	1	2	23	24
	303	Transaction Reason Code	M	1	2	25	26
	304	Transaction Set Type Effective Date	M	1	8	27	34
Insurer	6	Insurer FEIN	M	1	9	35	43
	7	Insurer Name	M	1	30	44	73
Insured	314	Insured FEIN	M	1	9	267	275
	17	Insured Name	M	1	90	276	365
	315	Insured Address Line 1	M	1	30	366	395
	316	Insured Address Line 2	C (send if address has 2nd line)	1	30	396	425
	317	Insured City	M	1	30	426	455
	318	Insured State	M	1	2	456	457
	319	Insured Postal code	M	1	9	458	466
	321	Business Market	M	1	1 1	477	477
	322	Wrap-up Indicator	M	1	1 1	478	478
	323	Insured Legal Status	M	1	2	479	480
Policy	28	Policy Number	M	1	30	481	510
	29	Policy Effective Date	M	1	8	511	518
	324	Prior Policy Number	C (send when applicable)	1	30	527	556
		The remaining reasons	o (coma michi applicasio)		1 33		
			C (send when Business Market				
	325	Assignment Date	above indicates involuntary)	1	8	557	564
Jurisdiction Employer Count	4	Jurisdiction	M	1	2	565	566
	326	Governing Class	M	1	4	567	570
	328	Number of Employers	M	1	4	582	585
Employer Count	020	Trumber of Employers	IVI		7	002	000
EMPLOYER RECO	RD I AYOUT						
Employer Segment	1	Transaction Set ID	M	1	3	1	3
	107	Record Sequence Number	M	1	9	4	12
	16	Employer FEIN	M	1	9	13	21
	18	Employer Name	M	1	60	37	96
	19	Employer Address Line 1	M	1	30	97	126
	20	Employer Address Line 1	C (send if address has 2nd line)	1	30	127	156
	21	Employer City	M	1	15	156	171
	22	Employer City Employer State	M M	1	2	172	173
	23		M M	1	9	174	182
	25 25	Employer Postal Code SIC Code	M*	1	6	183	188
	330	Number of Employees	M	1	6	189	194
	330	Inditiber of Employees	l l	1	ь	189	194
	204	Franksian Natification Deta	C (send for cancellations and	,		405	000
	331	Employer Notification Date	non-renewals)	1	8	195	202

Note: M=Mandatory/ and C=Conditional (must be sent when applicable) * Will be accepted with errors.